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Bib Data Sheet

CONFIRMATION NO. 1650

<b>SERIAL NUMBER</b> 10/663,362	<b>FILING OR 371(c) DATE</b> 09/16/2003 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> IFLOW.149A	
<b>APPLICANTS</b> Roger Massengale, Mission Viejo, CA; Kevin M. Forrest, Rancho Santa Margarita, CA; Bill Porter, Carlsbad, CA; Donald M. Earhart, Irvine, CA; Alan Dine, Pleasant Plain, OH;  ** CONTINUING DATA *****  ** FOREIGN APPLICATIONS *****  IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/05/2003					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 24	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 20995					
<b>TITLE</b> FLUID MEDICATION DELIVERY DEVICE					
<b>FILING FEE RECEIVED</b> 959	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		